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CONFIRMATION NO. 5266

<b>SERIAL NUMBER</b> 10/715,772	<b>FILING OR 371(c) DATE</b> 11/17/2003 <b>RULE</b>	<b>CLASS</b> 224	<b>GROUP ART UNIT</b> 3727	<b>ATTORNEY DOCKET NO.</b> 114639-009
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## APPLICANTS

Worth Brown, Chicago, IL;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 10/298,809 11/18/2002 (LW)

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

None (W)

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*  
02/17/2004

\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> IL	<b>SHEETS DRAWING</b> 8	<b>TOTAL CLAIMS</b> 24	<b>INDEPENDENT CLAIMS</b> 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: [Signature] Initials: [Initials]				

## ADDRESS

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## TITLE

Wearable personal item carrier

<b>FILING FEE RECEIVED</b> 583	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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